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Dated: 11-16-04 Signature: Denise Camerato
(Denise Camerato)

Docket No.: CTPH-P02-004
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Hagood et al.

Application No.: 09/584881

Group Art Unit: 2834

Filed: June 1, 2000

Examiner: T. M. Dougherty

For: ELECTRICAL POWER EXTRACTION FROM
MECHANICAL DISTURBANCES

CHANGE OF ATTORNEY DOCKET NUMBER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Please note that the Attorney Docket Number has been changed from 10722-005001 to **CTPH-P02-004**. Please reference **CTPH-P02-004** on all future correspondence.

Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 18-1945, under Order No. CTPH-P02-004 from which the undersigned is authorized to draw.

Dated: November 16, 2004

Respectfully submitted,

By Edward J. Kelly

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Attorneys/Agents For Applicant



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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/584,881
	Filing Date	06/01/00
	First Named Inventor	Nesbitt Hagood
	Art Unit	2834
	Examiner Name	Dougherty, Thomas M.
	Attorney Docket Number	CTPH-P02-004

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

OR

☐ Firm or
Individual Name

ROPES & GRAY LLP
Edward J. Kelly, Reg. No. 38,936

Address

City

Country State Zip

Telephone Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Nesbitt Hagood Chief Technology Officer Continuum Photonics, Inc. 5 Fortune Drive Billerica, Massachusetts 01821		
Signature			
Date	<input type="text" value="10-19-04"/>	Telephone	<input type="text" value="978-670-4910"/>

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of forms are submitted.



PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

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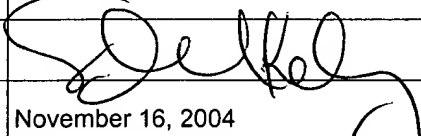
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/584,881
		Filing Date	06/01/00
		First Named Inventor	Nesbitt Hagood
		Art Unit	2834
		Examiner Name	Dougherty, Thomas M.
Total Number of Pages in This Submission	3	Attorney Docket Number	CTPH-P02-004

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Change of Attorney Docket Number Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	ROPES & GRAY LLP Edward J. Kelly - 38,936
Signature	
Date	November 16, 2004

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Signature:  (Denise Camerato)